PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10042833

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			14				Г	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ε	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/		* 3			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 mi	nus 3 =	*5			X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PF	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0" in c			olumn 2		TOTAL	A	OR	TOTAL	240
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2)						(Column 3)		OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	./9	Minus	** 7	0	=		X\$ 9=		OR	X\$18=	
AME	Independent	· #2	Minus	***	3	=	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
BEST AVAILABLE CUPY							Δ	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	*	OR	X\$18=	
	Independent	*	Minus	***	T CL ADA	=		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
BEST AVAILABLE CUPY							Α	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	1	X42=			X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		」 ├			OR		
	16 Ab	mm 4 in lass these ti	ho onto la cal	ump 0 ···-	o "O" in co	olumn 2		+140=		OR	+280=	
##	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE											
		nber Previously Pa					er four	nd in the app	oropriate bo	x in co	lumn 1.	